Navigating Rural Health Resources

Phone number: 1-866-620-7326
Access code: 350-750-3156

Kansas
Department of Health
and Environment
Division of Public Health

AD ASTRA PER ASPERA

Highlight state and federal programs relevant to Kansas in hopes to connect our local providers and communities with useful resources and tools.

- USDA Rural Development

- Heartland Telehealth Resource Center

USDA Rural Development
U.S. DEPARTMENT OF AGRICULTURE

2020 Distance Learning & Telemedicine Grant Program

Presented by: Shekinah Pepper

Acting Supervisory GFR

Distance Learning & Telemedicine Grant Program – The Basics

Distance Learning

- Distance Learning means the **real-time, interactive** delivery of **curriculum via telecommunications** and promotes the connection of students and teachers at remote sites.

  - Provide educational programs, instruction, or information originating in one area, whether rural or not, to students and teachers who are located in rural areas; or

  - Connect teachers and students, located in one rural area with teachers and students who are located in a different rural area.

Distance Learning & Telemedicine Grant Program – The Basics

Telemedicine

- Telemedicine is a **real-time, interactive, telecommunications** link to an end user from medical professionals at separate sites in order to exchange health care information for the purpose of providing improved health care services to residents of rural areas.

  - Benefits rural residents both in reduced travel and improved access to service

Distance Learning & Telemedicine Grant Program - Assistance

Sources of Assistance

- Website: https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants
- App Guide: https://www.rd.usda.gov/sites/default/files/FY2020_DLT_App_Guide_Final.pdf
- General Field Representatives (GFR): Applicants may contact their GFR for technical assistance up to 15 days prior to closing date of application window. GFR listing is found at https://www.rd.usda.gov/contact-us/telecom-gfr
- DLT Mailbox: DLTInfo@usda.gov
- RUS National Office: 202-720-0800

Distance Learning & Telemedicine Grant Program - Applying

Completing the Grant Application

A. Standard Form 424 w/Site Worksheet
B. An Executive Summary of the Project
C. Scoring Criteria Documentation
D. Matching Requirements
E. Scope of Work
F. Financial Information and Sustainability
G. Statement of Experience
H. Telecommunications Systems Plan

I. Compliance with other Federal Statutes
J. Evidence of Legal Authority and Existence
K. Environmental Impact & Historic Preservation
L. Consultation w/ USDA State Director & State Strategic Plan Conformity
M. Supplemental Information

Distance Learning & Telemedicine Grant Program – The Basics

Available Funding

FY2019
- **$37.9 million** available for Traditional DLT FY2019
- **$26.2 million** available for Opioid DLT FY2019 in rural areas to help address the opioid epidemic in rural America

FY2020 **Window 1 - $71.7 million available**
- **$12 million** for projects that help address opioid epidemic
- **$9.4 million** for projects that address substance use disorder
- **$50.3 million** for all eligible DLT projects

Window 2
- **$24.25 million** for all eligible DLT projects (CARES Act funding)
- Any carryover from Window 1

- 15% Matching Requirement
- Minimum Grant amount: $50,000
- Maximum Grant Amount: $1,000,000

Program Updates

FY2019
- **181** applications received for **$58.1 million**
- **145** applications approved for **$45.4 million**:

DL	TM	Overall
67 awards	78 Awards	145 awards
27 States, 2 territories	32 states, 2 territories	**38 states, 2 territories represented**
$24.1 million	$21.3 million	$45.4 million

STEM & Opioid Special Consideration Point Projects

51 Opioid	60 STEM	34 None	145 awards
$14.7 million	$22.0 million	$8.7 million	Tot: $45.4 million

FY2020

- **FOA #1** released February 10, 2020, applications due or shipped by April 10, 2020 via Grants.gov or paper
- **274** applications received for **$155.3 million** (as of 5/1/2020)

- **FOA #2** released April 14, 2020, closed July 13, 2020, via **Grants.gov only**

https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants

Distance Learning & Telemedicine Grant Program - Eligibility

Applicant Eligibility

- The following entity types are eligible to apply:
  - Incorporated organization;
  - Indian tribe or tribal organization, as defined in 25 U.S.C. 5304;
  - State or local unit of government;
  - Consortium as defined in 1734.3; or
  - Other legal entity, including a private corporation organized on a for-profit or not-for-profit basis.
  - **Almost every entity except individuals & partnerships**

Distance Learning & Telemedicine Grant Program - Eligibility

Examples of eligible equipment

- Computer hardware and software

- Computer network components

- Data terminal equipment

- Inside wiring

- Audio and video equipment

- Telecommunications terminal equipment

- Interactive audio/video equipment

- Broadband facilities, **if applicant-owned**

✓ The application must demonstrate that the predominant purpose (50% or more of use) of every line-item in the grant and match budget meets the DLT Grant definition of distance learning or telemedicine.

✓ All equipment must be new and non-depreciated

Distance Learning & Telemedicine Grant Program - Eligibility

Ineligible Grant Purposes *(See DLT Application Guide for details)*

- Medical or educational equipment not having telemedicine or distance learning as its essential function

- Electronic Medical Record Systems

- Salaries, administrative, operating, or recurring expenses (including recurring broadband connection fees)

- Application preparation costs

- Purchase of land, buildings, building construction, site development, or destruction or alteration of buildings.

- Any purpose not specifically contained in 7 CFR 1734.21

Distance Learning & Telemedicine Grant Program - Matching

Matching Contribution (15% of the grant amount required)

- Can either be cash (recommended) or in-kind
- Must be for a purpose that would be otherwise eligible for grant funding and must be integral to the project
- Cannot include federal funds unless there is a federal statutory exception
- Only new, non-depreciated equipment with an established value may be considered an in-kind match
- Vendor discounts or supplied equipment is not an eligible match
- Special matching provisions for American Samoa, Guam, Virgin Islands, and the Northern Mariana Islands

Distance Learning & Telemedicine Grant Program - Scoring

Scoring – Maximum possible is 110 points

- **Objective Criteria (80 points)**
  - Rurality (40 points)
  - Economic Need (30 points)
  - Special Consideration (10 points)

- **Subjective Criteria (30 points)**
  - Needs and Benefits

Distance Learning & Telemedicine Grant Program - Scoring

STEM Education

- For DLT, STEM education is defined as education in the various science, technology, engineering, and mathematics disciplines

- STEM encompasses a wide range of academic and technical subjects

- STEM includes health care programs that train students for careers in medical and science research fields

- STEM includes career and technical education and apprenticeships in any of the STEM fields

Distance Learning & Telemedicine Grant Program - Scoring

Opioid or other Substance Use Disorder (SUD) Treatment

- Special consideration has been broadened to include other SUD treatment, as well as opioid treatment

- The Executive Summary should clarify if SUD treatment includes opioids

- Eligible treatment purposes include:
  - Counseling of people with SUD
  - Treatment of people with SUD
  - Training of medical professionals, counselors or first responders in the interaction with people with SUD
  - Education programs addressing SUD

Distance Learning & Telemedicine Grant Program - Scoring

Opportunity Zone

- Special consideration will be given to applications that have at least one End-User Site in an Opportunity Zone

- An Opportunity Zone is an economically distressed community where new investments may be eligible for preferential tax treatment. Localities are nominated by the State and certified by the Secretary of the Treasury.

- Current Opportunity Zones can be found at https://www.cdfifund.gov/pages/opportunity-zones.aspx

- The Executive Summary should identify the End-User Sites that are located in Opportunity Zones

Distance Learning & Telemedicine Grant Program - Scoring

Subjective Criteria: Needs & Benefits (30 points max)

1. **Need for Services**: the economic, geographic, educational, or health care challenges facing the communities in the project. Documentation should support the claims.

2. **Benefits Derived from Services**: how the proposed project will help resolve the problems identified. Identification of benefits should include quantifiable goals (e.g. # students projected to take new courses, # patients to receive care, time saved seeking medical treatment)

3. **Local Community Involvement**: participation in the planning and development of project by local residents and organizations. Documentation of meetings, support, including contributions.

Distance Learning & Telemedicine Grant Program - Applying

I. Compliance with other Federal Statutes

Application checklist available on the DLT website should be inserted under Section I signed by an authorized representative

By signing this checklist, you are certifying you understand by submitting the application you have enclosed the required document I-1. By signing this certification, you are agreeing to the language in schedules I-2, I-3, I-4, I-5, and I-6, as shown in the application guide. To the extent any certification requires a question to be answered, please address your answer as a narrative attachment to this checkIist. (I-2 and I-3 have questions that need to be answered, please attach an expIanation to this checkIist as to which seIections you are making). If you have any questions about your application, please contact RUS prior to submitting this application and certification.

Print Name   Title   Signature   Date

Distance Learning & Telemedicine Grant Program - Applying

System for Award Management (SAM – www.sam.gov)

- **Registration is required**: All applicants must register in SAM <mark>prior</mark> to submitting an application. It can take up to 12-15 business days after submitting a SAM registration for it to be active. Plan accordingly.

- **Registration must be active**: The registration must remain active with current information at all times while RUS is considering an application or while a DLT grant is active.

- **Financial assistance certifications and representations must have been made**: If you didn't make these certifications when registering or updating, edit your registration in SAM to include the certifications before applying. <mark>Without the certifications, you are not eligible for a grant.</mark>

Distance Learning & Telemedicine Grant Program - Assistance

Program Contact

Shekinah Pepper

P.O.Box 372

Wichita, KS 67201

shekinah.bailey@usda.gov

Voice: (316) 570-3249

States Covered: KS, AK

Questions?

Rural Development | Telecommunications Program
Rural Utilities Service | U.S. Department of Agriculture
1400 Independence Ave., S.W. | Washington, D.C. 20250
www.rd.usda.gov

USDA Rural Development
U.S. DEPARTMENT OF AGRICULTURE

FIVE ESSENTIAL STEPS FOR BUILDING TELEHEALTH DURING COVID

August 11, 2020

Janine Gracy, MS, CHES, CPP - HTRC Project Director
University of Kansas Medical Center
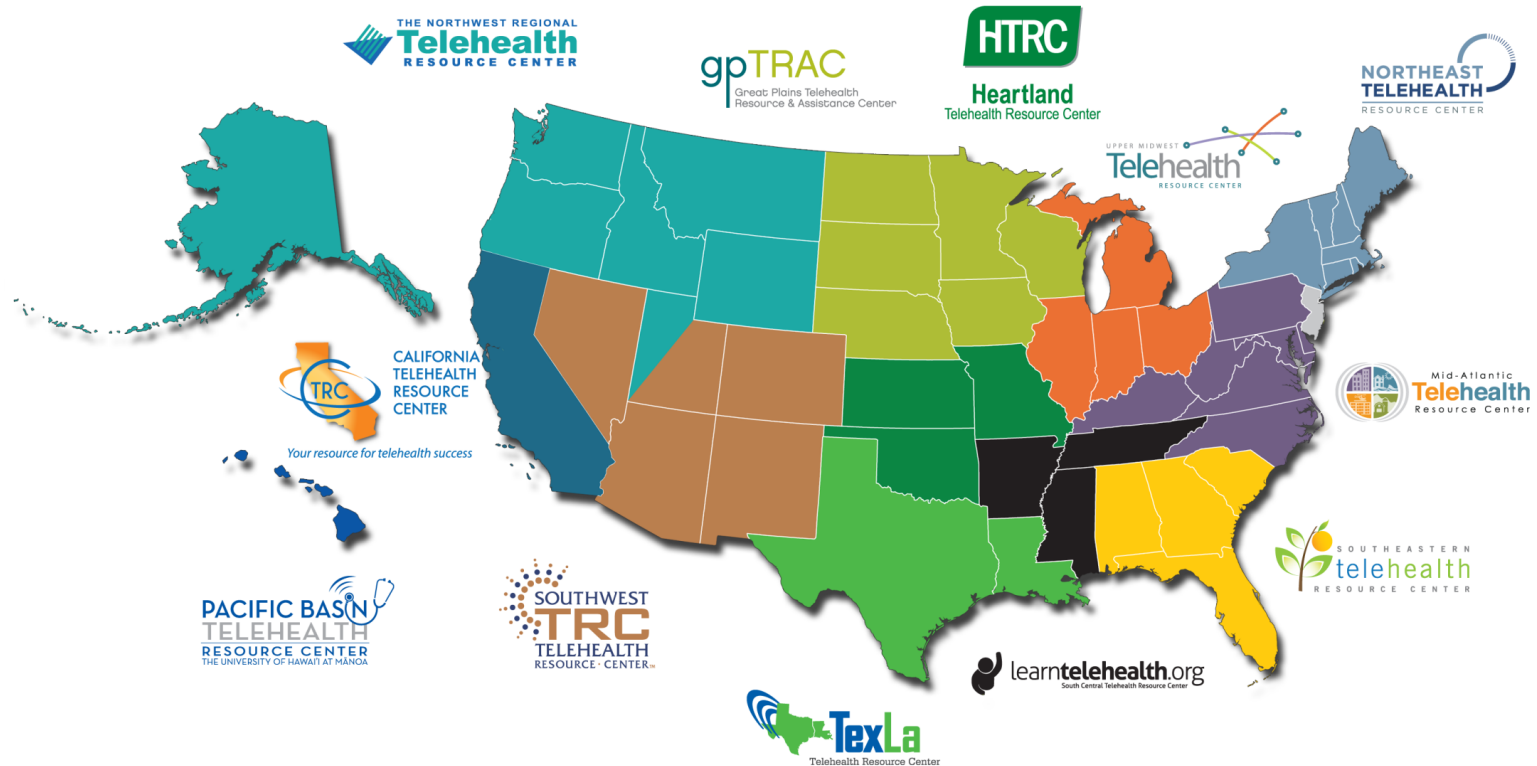
Heartland Telehealth Resource Center

How HTRC can help. . .

- On-line resources & tool kits

- Webinars and workshops

- Presentations

- Staff training

- Peer to peer connections

- Consultation services

...and more!

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Enter COVID-19
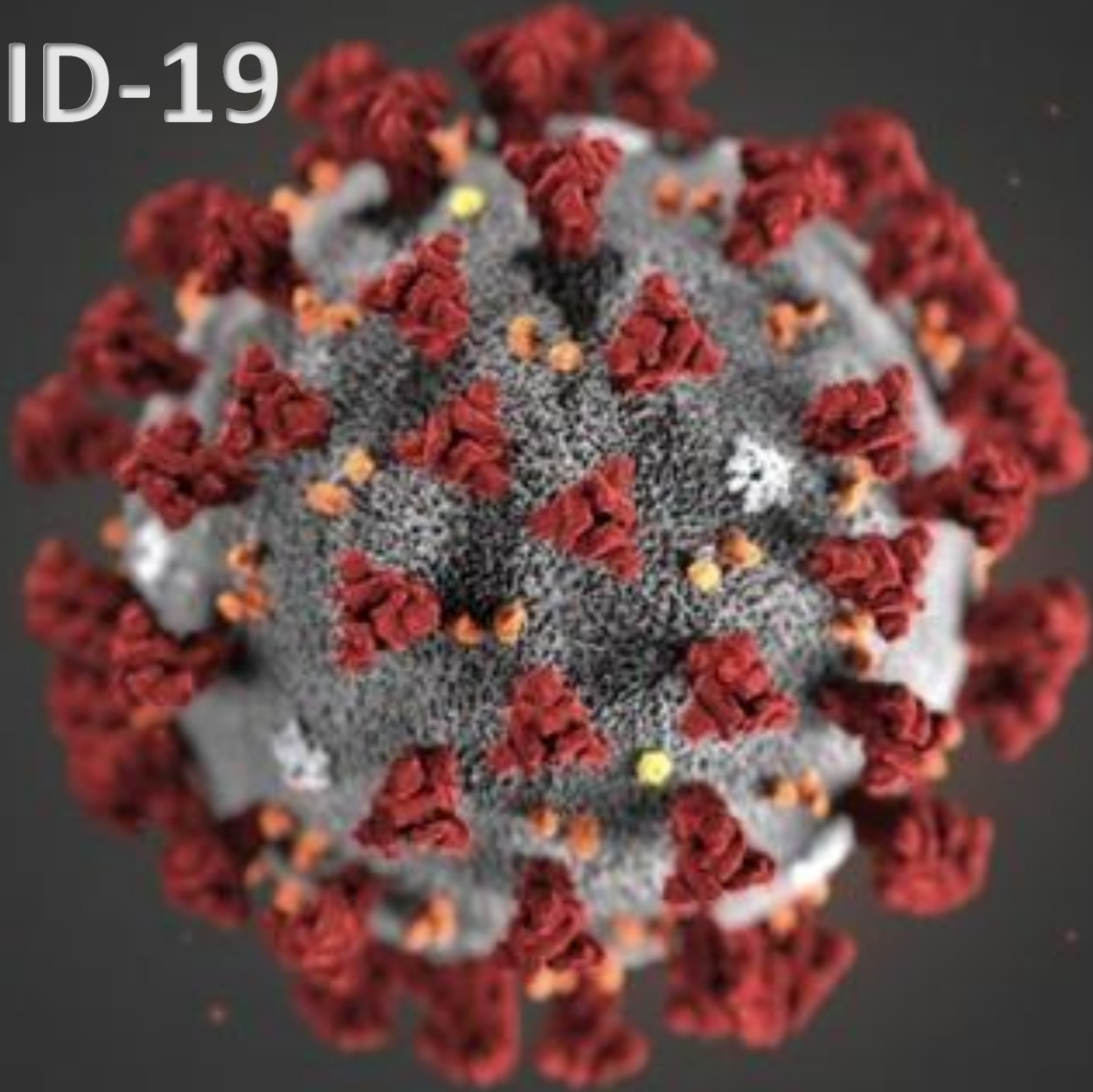
The Future is NOW!
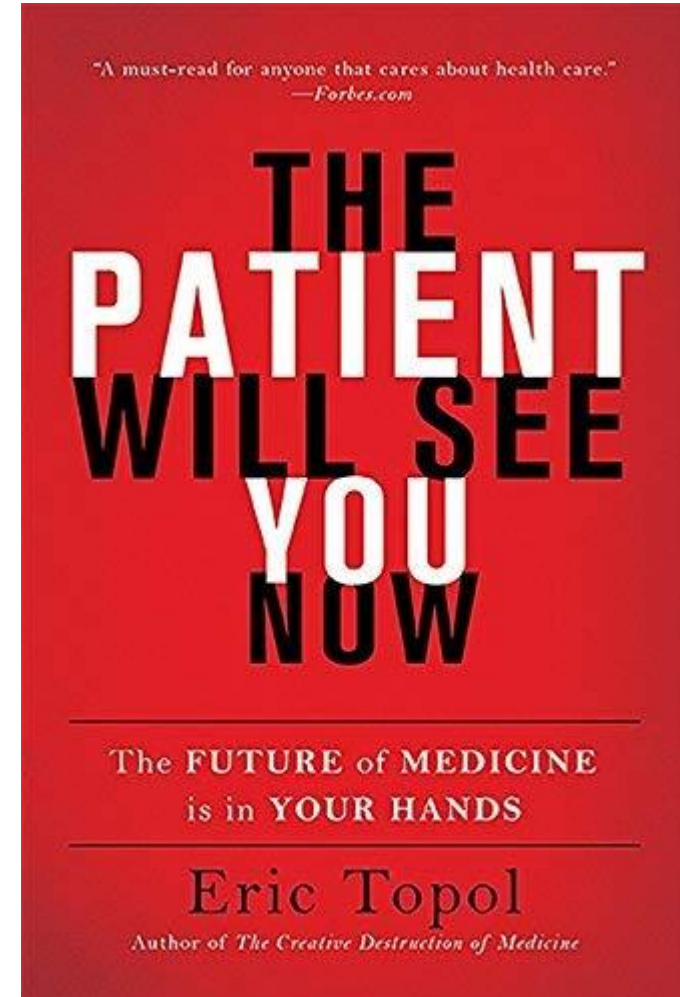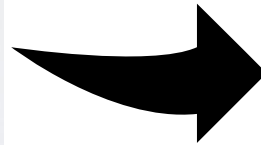
…..And They're Off!

"THE DAY YOU STOP RACING, IS THE DAY YOU WIN THE RACE." – BOB MARLEY

COVID-19 and Telemedicine

- https://www.cchpca.org/resources/covid-19-related-state-actions

- https://www.telehealthresourcecenter.org/covid-19-resources/
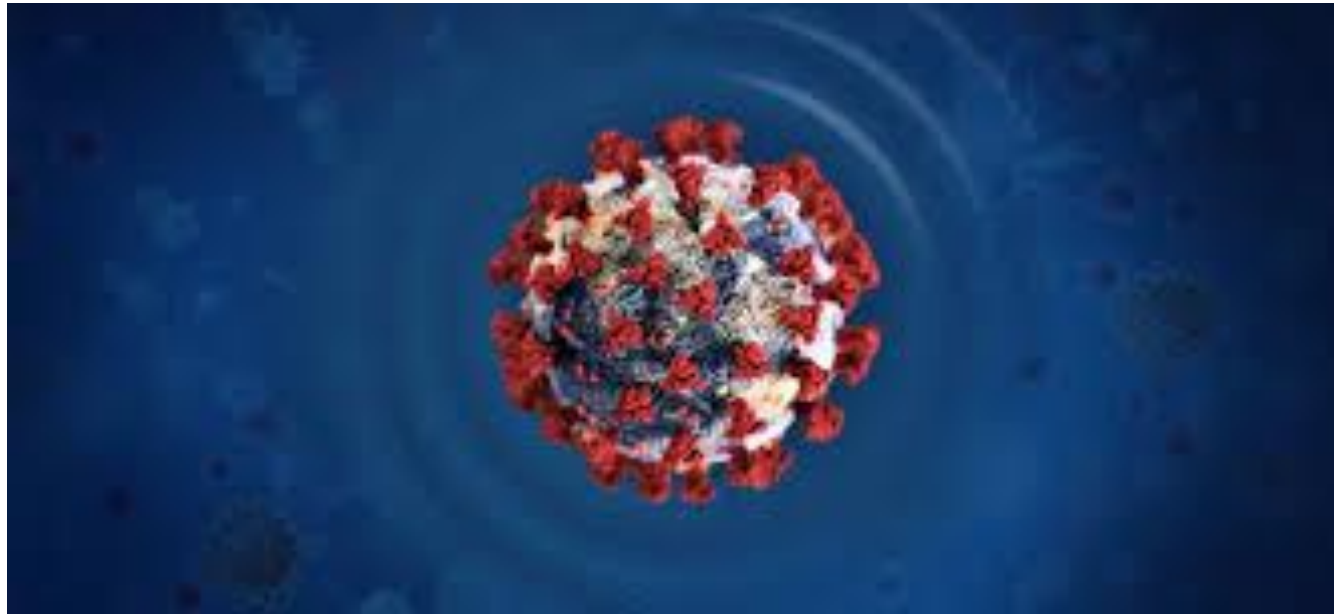
Getting Started = Step 1

- Bring a team together

- Decide what you are trying to achieve

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People to Keep in Your Circle!

- Health Care Providers
- Other Professional Colleagues
- Clinical Director
- Billing Office
- Schedulers
- IT
- Marketing

Telemedicine Readiness Questions

What are the payment and policy guidelines specific to various telemedicine services?

Do we have the resources available to begin?

- Champion
- Equipment
- Staff
- Leadership

Do we have the resources available to begin?

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GETTING STARTED – Step 2

- Decide on the type of services to be provided – prepare a preliminary program description

- Decide on the type of telehealth program that best works for your application and prepare a preliminary program model description

- Research Reimbursement

- Keep excellent notes!

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Assessing Lines of Service

- What appointments are appropriate for Telehealth in the home?
  - Tele-Video
  - Telephonic
- What appointments are appropriate for Telehealth in an originating site?
  - Peripherals?
- What appointments must occur in person?

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Primary Care Clinical Use Cases

- Diabetes
- Hypertension
- Coronary artery disease
- Cardiac arrhythmia
- End stage renal disease
- Hepatitis
- Asthma/COPD
- Obesity
- Oncologic co-morbidities
- Neurodegenerative diseases

- Patients who have treatment plans that frequently are adjusted and closely monitored can be managed via telemedicine.
- Video-based follow-up appointments may involve:
  - Med adjustments
  - Managing side effects
  - Lab results
  - Tx plan management

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Primary Care Clinical Use Cases

- Wellness exams and follow-ups are excellent for telemedicine
- Visits can focus on lifestyle changes, and basic health education regarding lab or imaging findings.

- Colonoscopy results
- Mammography results
- Lipid results
- Blood Glucose results
- CBC results
- Liver function results
- Annual Exam results

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Primary Care Clinical Use Cases

Annual Wellness Visit

1. Complete a Health Risk Assessment (HRA)
2. Establishing or updating the patient's current medical and family history
3. Complete medication reconciliation including a list of a patient's current providers
4. Review any history or present use of opioids. If the patient is using opioids, review the benefits of alternative pain therapies instead even if the patient does not have opioid use disorder but may be at risk
5. Recording measurements of height, weight, body mass index (BMI), blood pressure and other routine measurements
6. Detecting any cognitive impairment
7. Screen for depression
8. Screen for balance, gait and fall risk
9. Screen for alcohol misuse, tobacco use, and for substance use disorders with a special focus on opioid use
10. Creating a Personalized Prevention Plan (PPP) unique to the patient, and providing appropriate referrals to health education or preventative services
11. Optional Best Practice: At the patient's discretion, furnish Advanced Care Planning (ACP) services

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GETTING STARTED – Step 3

Develop Business Case

- Description of how the proposed program aligns with the organization's existing mission, lines of business, and/or strategic plans

- Cost and income estimates

- Description of how program development and implementation will be structured, managed and marketed

GETTING STARTED – Step 4

- Detailed Program Implementation Plan
  - Protocols, Guidelines, Policies, Workflow
- Detailed Technology Plan
- Develop Performance Monitoring Plan
  - Patient/Provider Satisfaction, Monitor Benchmarks

Video Platform Trends

- Web-Based

- Direct to Patient in Home

- Mobile Platforms

- Link-Based (No downloads)

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Is Your Infrastructure Ready?

Sufficient Bandwidth both downlink and uplink

FCC Recommends:

Single Physician Practices – 4 Mbps

Small Physician Practice (2-4 physicians), Skilled Nursing Facility, Rural Health Clinics – 10 Mbps

Large Practices (5-25 physicians) – 25 Mbps

Hospital - 100 Mbps

This Photo by Unknown Author is licensed under CC BY

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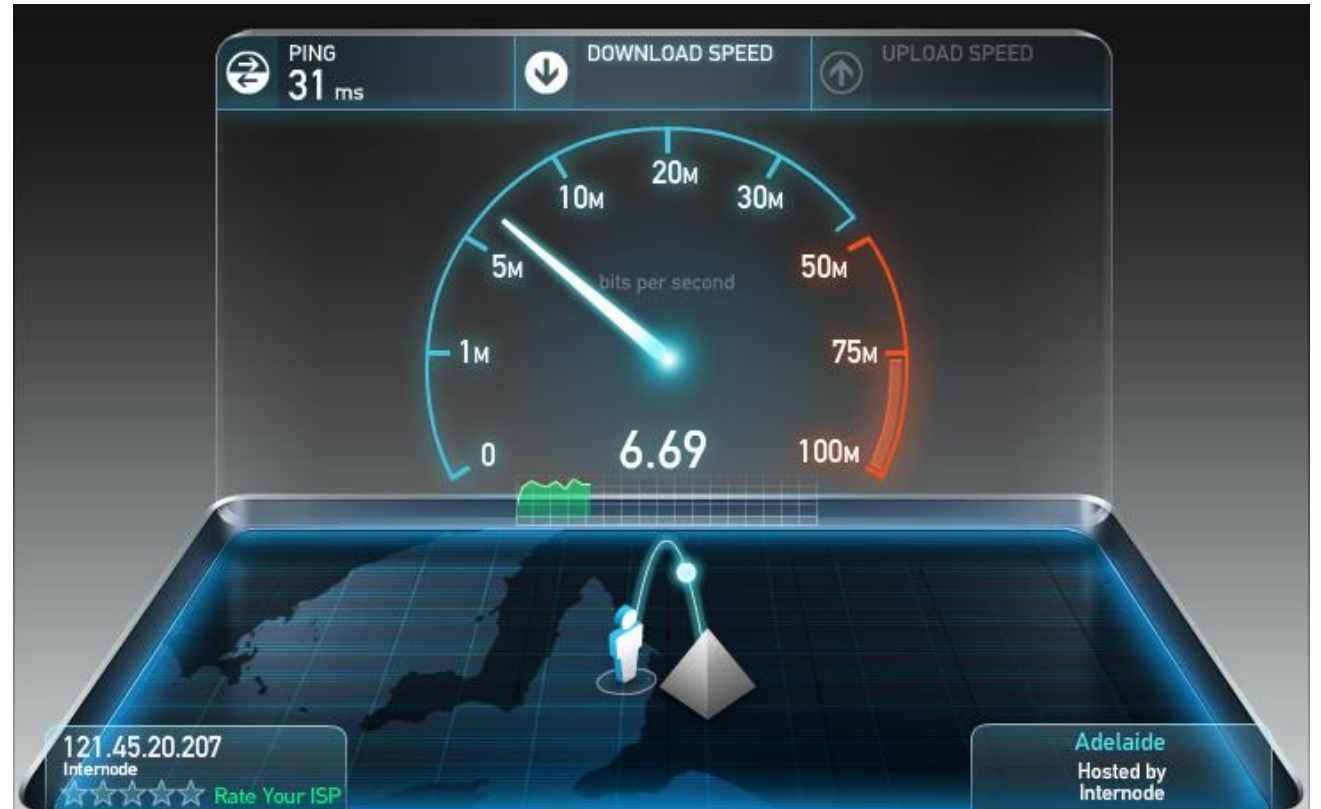
Is Your Infrastructure Ready?

Most Reliable

Hardwire Telemedicine Equipment Directly to Modem

Relying on Wi-Fi May Create Differences in:

Speed

Image

Quality

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Equipment

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No Need to Purchase Excessive Amount of Equipment!

- **Take Inventory of Equipment on Hand**

- **Stay within your Budget**

Equipment
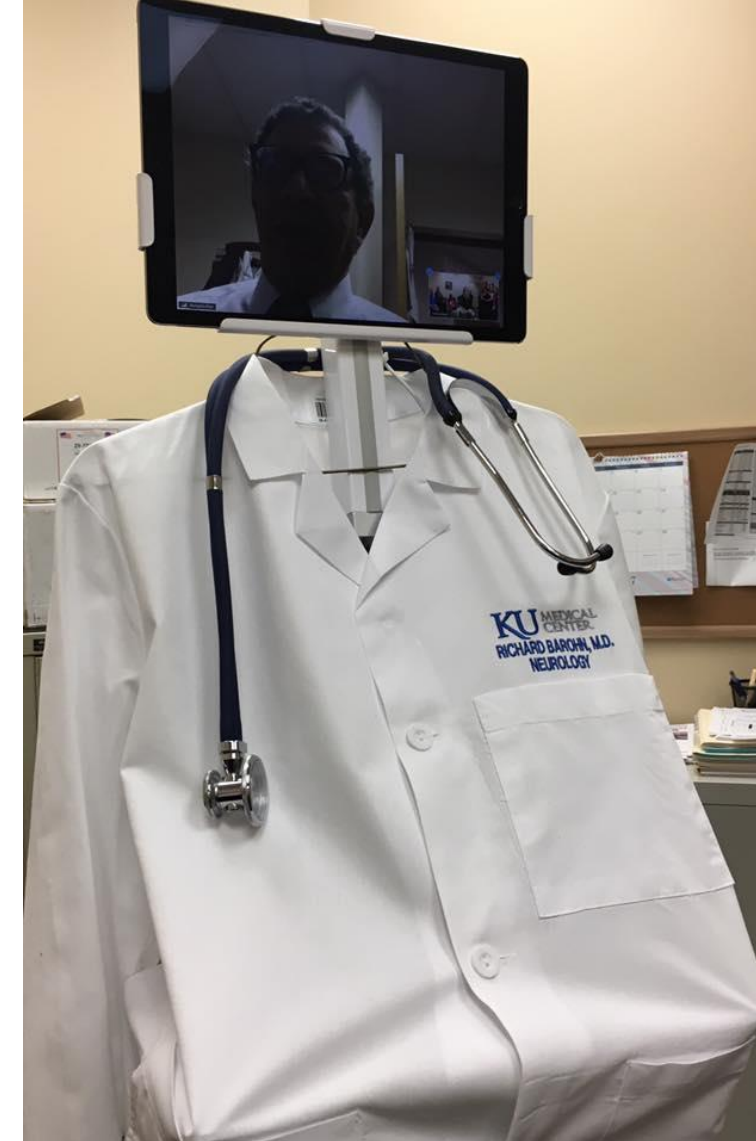
Exam Camera

At Home Devices

Electronic Stethoscope

Wireless Video Otoscope

- **Telemedicine Equipment and Space?**
  - Desktop or Laptop
  - Webcam and Audio
  - Privacy
  - Acoustics
  - Comfort

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GETTING STARTED – Step 5

FINALLY...........IMPLEMENTATION!

- Equipment is purchased and installed;
- Clinical protocols are finalized;
- Contracts are implemented;
- Operational processes and procedures are created or revised and communicated;
- Staff are hired or assigned AND trained;
- Facilities are established;
- All aspects of the telemedicine program are tested (to the extent feasible) to ensure that the program is ready to begin delivering the targeted services using the envisioned Program model.

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In the Heartland Region

Virtual Health Care -May replace the Telehealth term as some still equate 'Tele' with Telephone.

CHI Foundation uses this term to describe new services. Mercy Virtual – The first hospital with no beds located in Chesterfield, MO

Mercy Virtual Health Care keeping patients out of the hospital | KSDK.com

Lessons Learned

- **Equipment doesn't need to be the most expensive to be the best**

- **Learn from others**

- **High satisfaction scores have been given for services**

Lessons Learned

- **It's Still Medicine –**

   Technology is just a Tool

- **Plan and Practice for Telehealth**

- **Telemedicine Implementation is a Process, not a destination**

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**2ⁿᵈ and 4ᵗʰ Tuesdays
9 a.m.**

NEXT NCTRC WEBINAR:

Novice to Expert: A Guide to Comprehensive Patient Assessment Using Telehealth in the Home

August 20th (Third Thursday of Each Month)
Time: 1:00 p.m. CST
Register: www.telehealthresourcecenter.org

Questions?

Technical assistance for starting or expanding telehealth services.
Serving Kansas, Missouri and Oklahoma

www.Heartlandtrc.org

jgracy@kumc.edu

Phone: 877.643.HTRC (4872)

Contact Information

Webpage: https://www.kdheks.gov/olrh/rural.html

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